

2.1 Code of Ethics

(Amended March 26, 2013)

I. OBJECTIVE

The purpose of this policy is to prescribe a general code of conduct for employees, who shall maintain certain standards of conduct.

II. DIRECTIVES

A. Chapter 112, Part III, Florida Statutes, Code of Ethics, applies to all employees. While there are other key provisions under Chapter 112, Florida Statutes that apply to County employees, some of the provisions of the statute include but are not limited to the following and are summarized below.

1. Unauthorized Compensation: No employee, or his/her spouse or minor child shall accept any compensation, payment or thing of value when such employee knows, or with the exercise of reasonable care, should know that it was given to influence the vote or official action of such employee. (For reference, see Section 112.313(4), Florida Statutes)
2. Doing business with one's agency: No employee who is empowered with the authority to purchase on behalf of the County in an official capacity shall directly or indirectly purchase, rent, or lease any realty, goods or services for the County from a business entity in which the employee, or the employee's spouse or child is an officer, partner, director or proprietor, or in which the employee, the employee's spouse or child (or any combination of them) has a material interest. No employee, acting in a private capacity, shall rent, lease or sell any realty, goods or services to the County or any of its agencies. (For reference, see Section 112.313(3), Florida Statutes)

3. Misuse of public position: No employee shall corruptly use or attempt to use their official position or any property or resource within their trust, or perform their official duties to secure a special privilege, benefit or exemption for themselves or others. (For reference, see Section 112.313(6), Florida Statutes)
 4. Disclosure or use of certain information: No employee shall disclose or use information not available to the general public and gained by reason of their official position for their personal gain or benefit or for the personal gain or benefit of any other person or business entity. (For reference, see Section 112.313(8), Florida Statutes)
 5. Conflicting employment or contractual relationship: No employee shall have or hold any employment or contractual relationship with any business entity or any agency which is subject to the regulation of, or is doing business with the County. No employee shall have or hold any employment or contractual relationship that will create a continuing or frequently recurring conflict between their private interests and the performance of their public duties, or that would impede the full and faithful discharge of their public duties. (For reference, see Section 112.313(7), Florida Statutes)
- B. The following provisions apply to all employees and are more stringent than the requirements of Section 112.313, Florida Statutes:
1. Gifts: No employee may solicit or accept a gift from any person or entity (or agent or lobbyist of such person or entity) doing business with or regulated by the County or which is given based upon any understanding that their official action would be influenced. (For reference to corresponding section, see Section 112.313(2), Florida Statutes)

2. Uncompensated service on boards, committees and commissions: The Florida Commission on Ethics has ruled that uncompensated service on a board, committee or commission (including not-for-profit corporations and unincorporated associations) doing business with or regulated by the County does not constitute a violation of the conflict of interest rules under Section 112.313(7), Florida Statutes. However, no County employee shall hold such a position unless he/she has been appointed thereto by the BCC or has obtained approval from the County Manager.
 - a. Any employee who wishes to serve on any committee, board or commission which is subject to the regulation of, or is doing business with the County, must first seek approval from the County Manager or designee. When making a decision pursuant to this provision, the County Manager shall consider the following:
 - Whether service on the board, committee or commission creates an appearance of impropriety or conflict.
 - Whether a unity of interest exists between the outside board, committee or commission so that it is in the best interests of the County to have the employee serve on the board, committee, or commission.
 - Whether service on the board, committee or commission would create a continuing conflict of interest.
 - Whether service on the board, committee or commission would prevent the employee from performing a full and faithful discharge of their public duties.

- b. The County Manager or designee shall not give approval of such service which would be in violation of the provisions of Section 112.313, Florida Statutes.

C. Solicitation of Funds

1. Selling of commercial products, such as make-up and jewelry by County employees or outside individuals, is prohibited on County time or on County property. An employee who engages in this type of selling may post their business on the intranet or employee bulletin boards (other than employment law bulletin boards) with a personal phone number or personal e-mail address for contact.
2. Selling and distributing products such as cookies and cards for charitable purposes which benefit schools, non-profit organizations, etc. is prohibited on County time and in work areas open to the public. However, books and sign-up lists may be left in break areas, or in areas that are not in view of customers. It is incumbent on employees to ensure that sales of this nature do not supplant work productivity and are not conducted in a manner that could be construed as obligatory.
3. A request by a department or employee for countywide aid or assistance to benefit an employee or a member of an employee's family in the event of need or tragedy should be made to the County Manager's established employee forum. The employee forum will convene and recommend to the County Manager an appropriate response. Final approval will be made by the County Manager.

4. Vendor solicitations for sales or donations for any purpose are prohibited unless approved by the BCC.
 5. Countywide campaigns for charitable giving through established non-profit organizations must be approved by the BCC.
- D. The Lake County Clerk of Circuit Court's Internal Audit Department is charged with receiving any citizen or employee concerns regarding fraud, waste, or abuse within Lake County government operations. Concerns regarding Code of Ethics violations can be reported to Supervisors, Human Resources Director, Department Directors, County Manager, Deputy County Manager, County Attorney, or the Lake County Clerk's Internal Audit Department.

For additional information and definitions relating to the Code of Ethics, see Chapter 112, Florida Statutes.



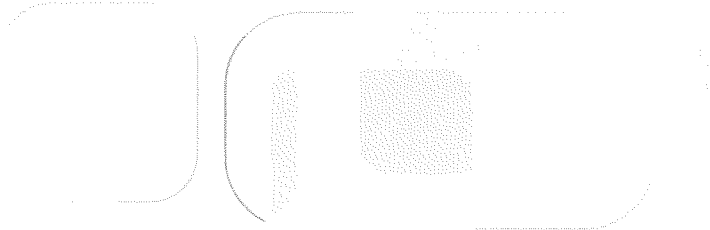
4.3 Drug Free Workplace (Amended March 26, 2013)

I. OBJECTIVE

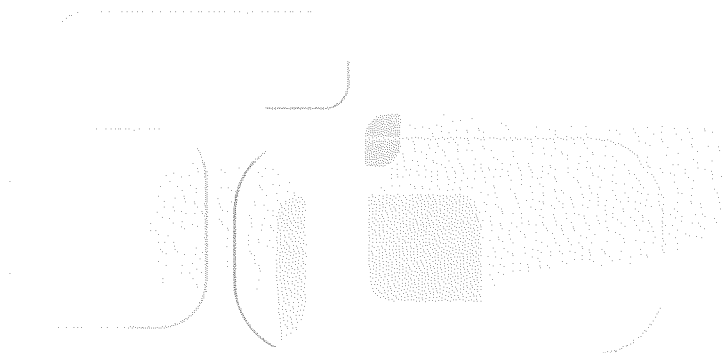
The County is committed to maintaining a workplace that is free from the presence and effects of drugs and/or alcohol, providing the highest level of service to its citizens, and minimizing the risk of accidents and injuries. This policy applies to all County employees and County volunteers.

II. DIRECTIVES

- A. The County prohibits employees from using, selling, dispensing, distributing, possessing, or manufacturing illegal drugs and/or alcoholic beverages while on County premises, work sites, or in a County vehicle. In addition, employees are prohibited from off-premise use of alcohol and possession, use, and/or sale of illegal/prescription drugs, when such activities adversely affect job performance, job safety, or interferes with the County's ability to carry out its mission.
- B. Employees must notify their supervisor if they have been prescribed a drug for a medical or other condition which could impair their ability to perform their job. If it is determined that the employee is unable to perform his/her job due to impairment caused by the medication, the employee should apply for appropriate leave and discuss the situation with his/her supervisor.



- C. Pursuant to Drug Free Workplace regulations, the County conducts drug and/or alcohol tests for the following reasons: reasonable suspicion, post-accident, routine fitness for duty, and follow-up. Safety sensitive and high-risk positions are also subject to pre-employment and random drug/alcohol tests.
- D. Employees and/or supervisors shall report immediately (during that working shift) to their Department Director and/or Human Resources Director any action by any employee who demonstrates an unusual behavior pattern. An employee believed to be under the influence of drugs and/or alcohol will be required to submit to a drug and/or alcohol test.
- E. County supervisory and managerial employees have the right to enter or search County property with or without notice, including desks, lockers, computers, phones and e-mail. Generally, there shall be no expectation of privacy while on any County property or of any property brought onto County premises.
- F. An employee will be subject to corrective action, up to and including termination, for violation of this policy.





LAKE COUNTY
BOARD OF COUNTY COMMISSIONERS
County Procedure

Title: Drug Free Workplace Program

Number: ES-4.02.01

Approved: March 16, 2007

Originator: Employee Services

Review: March 16, 2012

I. PURPOSE AND SCOPE

The purpose of this document is to provide a written description of Lake County's Drug Free Workplace Program.

II. REFERENCES

Florida Statute, Chapter 440.102, Drug-Free Workplace Program Requirements
Lake County Drug Free Workplace Policy (LCC-28)

III. APPLICABILITY

This procedure applies to all employees of Lake County Board of County Commissioners (BCC).

IV. DEFINITIONS

- A. Drug - means alcohol, including distilled spirits, wine, malt beverages, and intoxicating liquors; amphetamines; cannabinoids; cocaine; phencyclidine (PCP); hallucinogens; methaqualone; opiates; barbiturates; benzodiazepines; synthetic narcotics; designer drugs; or a metabolite of any of the controlled substances.
- B. Controlled Substances - means any substance, including its metabolites, as defined in Section 893.02(3), Florida Statutes or as defined by federal law.
- C. Drug Test - means any chemical, biological, or physical instrumental analysis administered, by a laboratory certified by the United States Department of Health and Human Services or licensed by the Agency for Health Care Administration, for the purpose of determining the presence or absence of a drug or its metabolites listed in this paragraph. An employer may test an individual for any or all of such drugs.
- D. Reasonable Suspicion – means a belief based on objective facts and the rational inferences which may be drawn from such facts, or based on direct or reported observations from a verifiable source that the particular employee is using or is impaired by drugs or alcohol.
- E. Safety-Sensitive Position - means, with respect to a public employer, a position in which a drug impairment constitutes an immediate and direct threat to public health or safety, such as a position that requires the employee to perform life-threatening procedures, or a position in which a momentary lapse in attention could result in injury or death to another person.

- F. Employee Assistance Program (EAP) - means an established program capable of providing expert assessment of employee personal concerns; confidential and timely identification services with regard to employee drug abuse; referrals of employees for appropriate diagnosis, treatment, and assistance; and follow-up services for employees who participate in the program or require monitoring after returning to work. In addition to the above activities, an Employee Assistance Program provides diagnostic and treatment services.
- G. Medical Review Officer (MRO) - means a licensed physician, employed with or contracted with an employer, who has knowledge of substance abuse disorders, laboratory testing procedures, and chain of custody collection procedures. MROs also verifies positive, confirmed test results; and who has the necessary medical training to interpret and evaluate an employee's positive test result in relation to the employee's medical history or any other relevant biomedical information.
- H. Chain of Custody - refers to the methodology of tracking specified materials or substances for the purpose of maintaining control and accountability from initial collection to final disposition for all such materials or substances and providing for accountability at each stage in handling, testing, and storing specimens and reporting test results.

V. **PROCEDURES**

A. General Administration

1. All Lake County employees are prohibited from using, selling, dispensing, distributing, possessing or manufacturing illegal drugs and narcotics or alcoholic beverages on County premises, work sites or in County vehicles. In addition, an employee is prohibited from off-premise use of alcohol and possession, use or sale of illegal drugs when such activities adversely affect job performance or job safety or interfere with the County's ability to carry out its mission. Such violations include, but are not limited to, possessing illegal and non prescribed drugs and narcotics or alcoholic beverages at work; being under the influence of such substances while working; using them while working; dispensing, distributing or illegally manufacturing or selling them on County premises or work sites or in County vehicles.
2. As a term and condition of employment, employees must refrain from taking drugs/alcohol that impair performance or are illegal on or off the job.
3. All County employees are strictly prohibited from reporting for work or performing work while impaired by drugs and/or alcohol.
4. Lake County conducts the following types of drug tests: reasonable suspicion, post accident, routine fitness for duty, and follow-up.
5. Safety sensitive and high-risk positions are also subjected to a pre-employment physical and drug test. If an employee's job classification requires an annual

physical, the employee will be required to submit to a drug test if applicable as part of the physical. Safety-sensitive positions that require a commercial driver's license (CDL) will require annual random drug and/or alcohol testing. (*Attachment 4*)

6. An employee may be required to take a drug test at any time to determine the presence of drugs in accordance with the reasonable suspicion alcohol and/or drug testing provisions of this procedure.
7. An employee who is arrested for or charged with any criminal drug and/or alcohol violation must report such arrest or charge to their supervisor and/or the Office of Employee Services within 72 hours. Failure to report this information may result in corrective action up to and including termination.
8. An employee's supervisor should report immediately (during that working shift) to their Department Director and/or Director of Employee Services any action by any employee who demonstrates an unusual behavior pattern. An employee believed to be under the influence of drugs and/or alcohol will be required to submit to a drug and/or alcohol test. The supervisor will arrange safe transit to the approved County testing site. The Sheriff's Office may be notified to arrange safe transit, if necessary.
9. An employee who uses legal and/or prescribed drugs during working hours or has any reason to expect such use may affect their ability to perform their work, must report this fact to their supervisor. A determination will then be made as to whether the employee will be able to perform the essential functions of the job safely and properly. Failure to report this information may result in corrective action up to and including termination.
10. An employee who is required to submit to a drug and/or alcohol test, who then states they have a problem with drugs and/or alcohol abuse is not exempt from corrective action, up to and including termination.
11. An employee who is experiencing work-related or personal problems resulting from a drug and/or alcohol abuse or dependency may request to seek counseling under the Employee Assistance Program (EAP). County sponsored or required counseling will be kept as confidential as possible. Failure to cooperate with an agreed upon treatment plan may result in corrective action, up to and including termination. An employee will not be permitted to return to work until certification is presented to their supervisor that the employee is capable of performing their job. Participation in a treatment program does not protect an employee from the imposition of corrective action for violations of this or other County policies.
12. An employee will be subject to corrective action, up to and including termination, for violation of the Drug Free Workplace policy and this procedure, a positive drug and/or alcohol tests, and/or refusal to submit to a drug and/or alcohol test.

13. An employee who refuses to test or who receives a confirmed test, forfeit all rights to Workers Compensation medical and indemnity benefits.

B. Testing

1. Pre-Employment (Pre-Duty) Testing

- a. For purposes of this section, the term "applicant" may include County employees who have been selected for internal promotions to vacant positions or those that have been reassigned or transferred to a safety sensitive position.
- b. Job offers made to applicants (post-offer) are contingent upon the applicant successfully passing a drug and/or alcohol test.
- c. If the applicant fails to pass the pre-employment drug and/or alcohol screening, he or she will be disqualified from consideration for employment and shall remain ineligible for employment with the County Administrator for six (6) months from the date of the initial positive test results. An applicant who fails to submit to the required pre-employment drug and/or alcohol test shall be denied further consideration for the position for which he/she applied.

2. Reasonable Suspicion Drug Testing

If required, all County employees, including those in safety-sensitive and high-risk positions, will submit to a drug and/or alcohol test for reasonable suspicion of drug and/or alcohol use.

Reasonable-suspicion drug testing means drug testing based on a belief that an employee is using or has used drugs in violation of the Lake County Drug Free Workplace policy and this procedure. An employee may be drug tested for reasonable suspicion based upon the following:

- a. Observable phenomena while at work, such as direct observation of drug use or of the physical symptoms or manifestations of being under the influence of a drug.
- b. Abnormal conduct or erratic behavior while at work, which may include a significant deterioration in work performance.
- c. A report of drug use, provided by a reliable and credible source (e.g. law enforcement).
- d. Evidence that an employee has tampered with a drug test during their employment with the current employer.

- e. Evidence that an employee has used, possessed, sold, solicited, or transferred drugs while working or while on the employer's premises or while operating the employer's vehicle, machinery, or equipment.
- f. For a reasonable suspicion drug test on an employee, the supervisor must complete the following steps:
 - (1) Complete a Reasonable Suspicion Observation Form, detailing specific observations as described above. The form requires the name and signature of two supervisors observing the questionable behavior. *(Attachment 2)*
 - (2) Report the incident to the Department Director and the Office of Employee Services.
 - (3) Remove the employee from the worksite immediately, and escort the employee to the designated specimen collection site (Lake County's authorized Healthcare Provider) for a drug test.
 - (4) Present a completed Reasonable Suspicion Drug Test Form to the designated specimen collection site at the time of the test and forward a copy to the Office of Employee Services. *(Attachment 3)*
 - (5) Place the employee on administration leave with pay status, until the confirmed test results are obtained.

3. Post Vehicle Accident Drug Testing

All employees, including safety sensitive employees, will be drug and alcohol tested immediately following a vehicle accident in which the appropriate law enforcement authority's accident report indicates that the County vehicle driver was at fault.

- a. The supervisor will escort the employee to the Lake County authorized Healthcare Provider immediately following the local authorities' completed investigation.
- b. If an employee receives emergency medical treatment at a hospital following a vehicle accident, the following time frames apply for post vehicle drug and alcohol tests:
 - (1) A post vehicle accident alcohol test needs to be administered as soon as practicable, but within four (4) hours following the vehicle accident. If the alcohol test is not administered within the four (4) hours, the supervisor will include information why the testing was unsuccessful within the four (4) hour period on the Lake County Property Damage Report – Supervisor Investigation.

(2) A post vehicle accident drug test needs to be administered as soon as practicable, but within thirty-two (32) hours following the vehicle accident. If the drug test is not administered within the thirty-two (32) hours following the accident, the supervisor will include information why the testing was unsuccessful within the thirty-two (32) hour period on the Lake County Property Damage Report – Supervisor Investigation.

4. Return to Duty/Follow-up Drug Testing

All employees who are afforded an opportunity to receive rehabilitation and completed a treatment program as a result of violating this policy will be required to successfully pass a re-test for drug and/or alcohol before returning to their job duties.

Follow-up testing will be randomly conducted once every six (6) months for a two (2) year period after completion of the program. Advance notice of a follow-up testing date will not be provided to the employee.

5. Safety-Sensitive and High-Risk Drug Testing

Safety-sensitive and high-risk describe positions in which a drug impairment constitutes an immediate and direct threat to public health or safety, such as a position in which a momentary lapse in attention could result in injury or death to another person.

Lake County's safety sensitive and high-risk positions require a pre-employment physical, and if applicable drug test. The employee as a part of pre-employment will proceed to the designated specimen collection site (Lake County's authorized Healthcare Provider) for a physical and if applicable a drug test. Employment with Lake County is contingent upon successfully passing the pre-employment physical and/or drug test.

- a. Safety-sensitive positions are required to be subject to a random drug and/or alcohol test annually after pre-employment (e.g., CDL position).
- b. High-risk positions are required to have a physical and if applicable a drug test annually after pre-employment (e.g., firefighter position).

If an employee in a safety-sensitive or high-risk position enters an employee assistance program or drug rehabilitation program on their own free will and not a result of an accident or reasonable suspicion screening the employee will be assigned a position other than a safety-sensitive or high-risk position or, if such position is not available, the employee will be placed on leave while the employee is participating in the program. The employee shall be permitted to use their accumulated annual and sick leave credits before leave may be ordered without pay.

6. Random Drug Testing

Employees whose safety sensitive position requires a Commercial Drivers

License (CDL) must comply with an annual random drug and/or alcohol test. Each calendar year, the County will randomly select and test 50% of the total number of safety sensitive employees for drugs, and 25% for alcohol. (*Attachment 4*)

- a. The selection of employees for random alcohol and/or drug testing shall be made by a purely random method, such as a computer-generated random number table. Each employee shall have an equal chance of being tested each time selections are made. The randomizer program will generate two (2) lists of numbers, a primary list and a secondary list.
- b. Employee Services will match the primary number list to a corresponding list of safety-sensitive employees (positions requiring a CDL). The secondary number list is used only if the employee on the primary list is not available within three (3) calendar days of the generation of the random numbers list.
- c. Employee Services will provide a Notification for Random Drug and/or Alcohol Testing Form containing the name of the employee to be tested to their supervisor by e-mail. After being contacted by the supervisor and presented a copy of the Notification for Random Drug and/or Alcohol Testing Form (e-mailed to the supervisor by Employee Services), the employee will proceed unescorted to the designated specimen collection site (Lake County's authorized Healthcare Provider) immediately for the drug test. (*Attachment 1*)
- d. The employee must arrive at the designated specimen collection site within forty-five (45) minutes of receiving the random drug test notification. The designated specimen collection site will be informed of the names to be tested by Employee Services. The employee will present, the Notification for Random Drug and/or Alcohol Testing Form, their County I.D. or driver's license to the Drug Screen Coordinator upon arrival at the designated specimen collection site.
- e. Employees will not be given advance notice with regard to the random drug and/or alcohol test. Any employee not available for a minimum of three (3) calendar days due to illness or annual leave, shall be placed back into the pool and the next number (and corresponding name/person), from the secondary random list will be screened.

C. Designated Collection Site

All pre-employment physicals and alcohol and/or drug tests are conducted by Lake County's authorized Healthcare Provider which acts as the collection site. Technicians are trained in the appropriate chain of custody procedures and can provide documentation if required.

All test results are reviewed and verified by a Medical Review Officer (MRO) (Licensed Physician). Employees and job applicants should report the use of prescription or non-prescription medications to the Medical Review Officer. Every

reasonable effort will be made to obtain the most accurate test results while affording the employee privacy during the collection process. Testing will be done in accordance with provisions of applicable law.

The Medical Review Officer is designated by the Healthcare Provider and functions independently of the County. The MRO's qualifications include a demonstrated knowledge of substance abuse disorders and appropriate medical training to interpret and evaluate a combination of an individual's positive drug and/or alcohol test results and his/her medical history and other relevant biomedical information in order to make an accurate review and/or analysis of the drug test results.

1. If the designated specimen collection site is not open and after hours testing is required as a result of reasonable suspicion or post accident, the supervisor will follow the established protocol:
 - a. Supervisor will complete the Reasonable Suspicion Observation Form and appropriate Property and Liability report(s) for post accident testing, if applicable.
 - b. The supervisor is required to call the designated specimen collection site's after hour phone number (after hours phone number listed on the Drug Free Workplace webpage) and then immediately escort the employee to the designated specimen collection site's location.
 - c. Supervisor will inform the Department Director and the Office of Employee Services as soon as possible during normal business hours.

D. Over the Counter or Prescription Drugs

The employee must notify their supervisor if they been prescribed a drug for a medical or other condition which could impair their ability to perform their job. If it is determined that the employee is unable to perform their job due to impairment caused by the medication, the employee should apply for appropriate leave or discuss alternative job duties that would not cause a safety concern with their supervisor.

An employee and job applicant should confidentially report the use of prescription or non-prescription medications to the County's Medical Review Officer (MRO) when contacted by the MRO. This information will be interpreted in order to determine test results.

E. Positive Test Results

If the drug test of a Lake County employee is confirmed as positive, the employer's Medical Review Officer (MRO) shall provide technical assistance to the employee for the purpose of interpreting the test result to determine whether the result could have been influenced by prescription or nonprescription medication taken by the employee.

1. Challenge Test Results

- a. An employee or job applicant who wish to challenge test results is responsible for notifying the County's designated specimen collection site of an administrative challenge or civil action brought pursuant to Florida Statute, Section 440.102.
- b. An employee or job applicant may contest test results pursuant to the rules adopted by the Department of Labor and Employment Security.
- c. Any additional laboratory testing resulting from a challenge to the test shall be at the employee's or job applicant's expense.

F. Drug Free Workplace Webpage

The Employee Services Drug Free Workplace webpage provides specific information and contact numbers (regular and after hour phone numbers) for authorized Healthcare Provider which acts as the collection site. The Office of Employee Services can also provide this information if necessary. To obtain this information, go to the Employee Services intranet/internet area and click on the Drug Free Workplace link.

G. Confidentiality and Record Maintenance

The results of drug and/or alcohol tests shall not be included in an applicant's or an employee's personnel file but shall be retained by the Office of Employee Services in a separate medical file, exempt from public inspection.

H. Searches

Everyone is concerned about personal security and the security of the workplace. Workplace security is a responsibility shared by the County and all employees. The County may request the cooperation of an employee in agreeing to a search of personal property such as packages, briefcases, purses and similar containers as well as private vehicles parked on County property. County supervisory and managerial employees have the right to enter or search County property with or without notice, including desks, lockers, computers, phones and e-mail. Generally, there shall be no expectation of privacy while on any County property or of any property brought onto County premises. This delicate balance between privacy and security is something important to everyone and cooperation is needed from all employees.

I. Communication of this Procedure

All employees will receive a copy of this procedure. All employees shall sign an Acknowledgment and Consent Form stating that they have received a copy of this procedure. The form will be placed in the employee's personnel file. (Attachment 5)

The Office of Employee Services will be responsible for coordinating drug and/or alcohol awareness programs and shall be responsible for answering employee questions regarding the County's Drug Free Workplace Policy and Procedure. Employees are encouraged to discuss this policy with their supervisors and/or managers.

The Lake County Drug Free Workplace Policy poster will be posted on all work location bulletin boards. (*Attachment 6*)

J. Training

All new employees to Lake County receive training on the Drug Free Workplace Policy and Procedures during New Employee Orientation. Drug Free Workplace training will be offered to all current employees and supervisors and management will be offered training as part of the Management Training Series.

VI. **RESERVATION OF AUTHORITY**

The authority to issue or revise this Procedure is reserved to the County Manager. The County Manager may authorize exceptions to this procedure when deemed appropriate.

Approved By: Cindy Hall, County Manager
Date: 3/16/07



Attachment 1

Drug Free Workplace

Lake County Board of County Commissioners

Notification for Random Drug Testing (Safety Sensitive)

Lake County
Human Resources
P.O.Box 7800
315 W. Main St.
Tavares, FL 32778-7800
Ph. (352) 343-9596
Fax (352) 343-9883

Designated Specimen Collection Site

Testing Date: _____

Expected Arrival Time: _____

Location(s): Centra Care

Clermont-15701 State Road 50 Clermont, FL 34711 (352) 394-7757
Leesburg-1103 N. 14th Street Leesburg, FL 34748 (352) 314-2238
Mount Dora-19015 U.S. 441 Mount Dora, FL 32757 (352) 383-3484

The following employee will proceed to the designated specimen collection site within forty-five (45) minutes of this notification.

Employee will be required to present their County I.D. or Driver's License to the Drug Screen Coordinator along with this notification form.

Employee Name: _____

Department: _____

Job Title (CDL required): _____

In accordance with Federal DOT Regulations and the Omnibus Employee Testing Act of 1991, you have been selected for a random drug and/or alcohol test.

☐ **Drug**

☐ **Alcohol**

Drug Screen Coordinator Section

Have the Drug Screen Coordinator (or designee) complete the next section.

Arrival Time: _____ Print Name: _____

Departure Time: _____ Signature: _____

After reporting to testing facility for screening, employee shall present this completed notification to their supervisor, who will forward the form to the Office of Employee Services.

Attachment 2



Drug Free Workplace
Lake County Board of County Commissioners

**Reasonable Suspicion Observation Form
(STRICTLY CONFIDENTIAL)**

Date/Time of Incident

Print Employee Name

Print Name of Supervisor #1

Print Name of Supervisor #2

This checklist is to be completed when documenting an incident which provides reasonable suspicion that an employee is under the influence of a prohibited drug, substance or alcohol. The supervisor(s) will note all pertinent behavior and physical signs or symptoms which lead to the reasonable belief the employee has recently used or is under the influence of, a prohibited substance.

Mark each applicable item on this form and any additional facts or circumstances.

Section A

Nature of the Incident/Cause for Suspicion	
1	<input type="checkbox"/> Observed/reported possession or use of a prohibited substance.
2	<input type="checkbox"/> Apparent drug or alcohol intoxication.
3	<input type="checkbox"/> Observed abnormal or erratic behavior.
4	<input type="checkbox"/> Arrest or conviction for drug-related offense.
5	<input type="checkbox"/> Evidence of tampering with a previous drug test.
6	<input type="checkbox"/> Other (e.g., flagrant violation of safety regulations, serious misconduct, fighting or argumentative/abusive language, refusal of supervisor instruction, insubordination or unauthorized absence on the job.) Please specify: _____ _____

Section B

Unusual Behavior	
1	<input type="checkbox"/> Verbal abusiveness.
2	<input type="checkbox"/> Physical abusiveness.
3	<input type="checkbox"/> Extreme aggressiveness or agitation.
4	<input type="checkbox"/> Withdrawal, depression, mood changes or unresponsiveness.
5	<input type="checkbox"/> Inappropriate verbal response to questioning or instructions.
6	<input type="checkbox"/> Other erratic or inappropriate behavior (e.g., hallucinations, disorientation, excessive euphoria or confusion.) Please specify: _____ _____

Section C

Physical Signs or Symptoms	
1	<input type="checkbox"/> Possessing, dispensing, or using controlled substance.
2	<input type="checkbox"/> Slurred or incoherent speech.
3	<input type="checkbox"/> Unsteady gait or other loss of physical control; poor coordination.
4	<input type="checkbox"/> Dilated or constricted pupils or unusual eye movement.
5	<input type="checkbox"/> Bloodshot or watery eyes.
6	<input type="checkbox"/> Extreme fatigue or sleeping on the job.
7	<input type="checkbox"/> Excessive sweating or clamminess to the skin.
8	<input type="checkbox"/> Flushed or very pale face.
9	<input type="checkbox"/> Highly excited or nervous.
10	<input type="checkbox"/> Nausea or vomiting.
11	<input type="checkbox"/> Odor of alcohol.
12	<input type="checkbox"/> Odor of marijuana.
13	<input type="checkbox"/> Dry mouth (frequent swallowing/lip wetting).
14	<input type="checkbox"/> Dizziness or fainting.
15	<input type="checkbox"/> Shaking hands or body tremors/twitching.
16	<input type="checkbox"/> Irregular or difficult breathing.
17	<input type="checkbox"/> Runny sores or sores around nostrils.
18	<input type="checkbox"/> Consistently wearing sunglasses indoors.
19	<input type="checkbox"/> Puncture marks or "tracks."
20	<input type="checkbox"/> Other (please specify). _____ _____

Section D

Written Summary
Please summarize the facts and circumstances of the incident, employee response, supervisor actions, and any other pertinent information not previously noted. Attach additional sheets as needed. _____ _____ _____

 Signature of Supervisor #1

 Date/Time

 Signature of Supervisor #2

 Date/Time



Attachment 3

Drug Free Workplace

Lake County Board of County Commissioners

Reasonable Suspicion Drug Testing

Lake County
Human Resources
P.O.Box 7800
315 W. Main St.
Tavares, FL 32778-7800
Tele (352) 343-9596
Fax (352) 343-9883

Designated Specimen Collection Site

Testing Date: _____

Expected Arrival Time: _____

Location(s): Centra Care

Clermont-15701 State Road 50 Clermont, FL 34711 (352) 394-7757

Leesburg-1103 N. 14th Street Leesburg, FL 34748 (352) 314-2238

Mount Dora-19015 U.S. 441 Mount Dora, FL 32757 (352) 383-3484

The following employee will proceed to the designated specimen collection site within forty-five (45) minutes of this notification.

Employee will be required to present their County I.D. or Driver's License to the Drug Screen Coordinator along with this notification form.

Employee Name: _____

Department: _____

Job Title: _____

Employee will submit to a drug and/or alcohol test for reasonable suspicion of drug and/or alcohol use/abuse.

Testing Authority	<input type="checkbox"/> FMSCA	<input type="checkbox"/> FTA	<input type="checkbox"/> DFWP
--------------------------	---------------------------------------	-------------------------------------	--------------------------------------

Test Type	<input type="checkbox"/> Drug	<input type="checkbox"/> Alcohol
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Drug Screen Coordinator Section

Have the Drug Screen Coordinator (or designee) complete the next section.

Arrival Time: _____ Print Name: _____

Departure Time: _____ Signature: _____

After reporting to testing facility for screening, employee shall present this completed notification to their supervisor, who will forward the form to Human Resources.



Attachment 4

Drug Free Workplace
 Lake County Board of County Commissioners
 Safety Sensitive and High-Risk Positions

Alcohol and/or Drug Testing Requirements		
CDL Class	Title	Alcohol and/or Drug Test
A	Equipment Operator IV	Alcohol and Drug Test
A	Senior Landfill Supervisor	Alcohol and Drug Test
B	Area Maintenance Supervisor	Alcohol and Drug Test
B	Assistant Area Maintenance Supervisor	Alcohol and Drug Test
B	Equipment Operator I	Alcohol and Drug Test
B	Equipment Operator II	Alcohol and Drug Test
B	Equipment Operator III	Alcohol and Drug Test
B	Mechanic	Alcohol and Drug Test
B	Mechanic/Welder/Fabricator	Alcohol and Drug Test
	Biological Technician	Alcohol and Drug Test
	Battalion Fire Chief	Alcohol and Drug Test
	Fire Lieutenant/EMT	Alcohol and Drug Test
	Fire Lieutenant/Paramedic	Alcohol and Drug Test
	Fire Marshal/Fire Investigator	Alcohol and Drug Test
	Fire Captain	Alcohol and Drug Test
	Fire Lieutenant/Fire Inspector	Alcohol and Drug Test
	Firefighter/EMT	Alcohol and Drug Test
	Firefighter/Paramedic	Alcohol and Drug Test
	Firefighter/Mechanic	Alcohol and Drug Test
	Probation Officer	Drug Test Only

Attachment 5



Drug Free Workplace Policy & Procedure

Acknowledgement & Consent Form

I acknowledge that I have received a copy of Lake County's Drug Free Workplace Policy and Procedure. I understand that:

- Copies of the policy and procedure can be found on the Lake County intranet/internet or by contacting the Office of Employee Services.
- Lake County is a drug free workplace, and as an employee, I am expected/agree to comply with the terms and provisions of the policy and procedures.
- I understand that this acknowledgment will become a part of my permanent employee file.

Employee's Name (Print Legible)

Employee's Signature

Date

Employee Number

Department

Once completed, please forward to the Office of Employee Services.

Attachment 6



Drug Free Workplace Policy

LCC-28 Approved 11/21/06

Objective

The Lake County Board of County Commissioners is committed to maintaining a workplace that is free from the presence and effects of drugs and/or alcohol, providing the highest level of service to its citizens, and minimizing the risk of accidents and injuries.

Directives

The County prohibits employees from using, selling, dispensing, distributing, possessing, or manufacturing illegal drugs and/or alcoholic beverages while on County premises, work sites, or in a County vehicle. In addition, employees are prohibited from off-premise use of alcohol and possession, use, and/or sale of illegal/prescription drugs, when such activities adversely effect job performance, job safety, or interferes with the County's ability to carry out its mission.

Pursuant to Drug Free Workplace regulations, Lake County conducts the following types of drug and/or alcohol tests: reasonable suspicion, post accident, routine fitness for duty, and follow-up. Safety sensitive and high-risk positions are also subjected to pre-employment and random drug/alcohol tests.

An employee will be subject to corrective action, up to and including termination, for violation of this policy.

For more information, please refer to the Drug Free Workplace Procedure ES-4.02.01 or contact the Office of Employee Services.

4.4 Harassment (Including Sexual Harassment) (Amended March 26, 2013)

I. OBJECTIVE

The County is committed to maintaining a working environment for employees (including applicants and County volunteers) that is free from any form of harassment, including sexual harassment. This policy applies to all County employees and County volunteers.

II. DIRECTIVES

- A. The term Harassment includes, but is not limited to, slurs, jokes, epithets, negative stereotyping, threats, intimidation, hostile acts; denigrating or hostile written or graphic material posted or circulated in the workplace or; any other graphic or physical conduct relating to an individual's race, color, age, gender (including pregnancy status), religious creed, national origin, disability status, marital status, genetic information or any other status protected by applicable law.
- B. Any form of harassment, including sexual harassment, related to the race, color, age, gender (including pregnancy status), religious creed, national origin, disability status, marital status, genetic information or any other status protected by applicable law shall not be tolerated.
- C. The term sexual harassment includes, but is not limited to, verbal statements such as jokes, innuendo, intimidation and/or physical conduct of a sexual nature; unwelcome sexual advances, propositions and/or innuendos that create hostile working conditions; display in the workplace of sexually suggestive or explicit objects, pictures or drawings and/or denigrating written or graphic material posted or circulated in the workplace; and any other graphic or physical conduct relating to a person's gender.

Verbal statements or physical conduct of a sexual nature is unlawful if such behavior creates a hostile or offensive environment, or submission to such conduct is either explicitly or implicitly made a term or condition of employment or a basis of any employment decision affecting the individual.

- D. The County does not condone harassment of its employees in connection with their work by non-employees (e.g., general public, vendors, and customers.)

E. Reporting

An employee who feels that they are being harassed by any other employee or non-employee, or any employee who becomes aware of any harassment of an employee should at once report the alleged act to any one or more of the following: his/her immediate Supervisor, the Human Resources Director, any Department Director, County Manager, Deputy County Manager, or the County Attorney.

Employees should not assume that the County is aware of any employee harassment problems. Employees should immediately bring all complaints and concerns to the County's attention so that the concerns can be resolved. Employees will not be penalized in any way for making a report, in good faith, under this policy and procedure.

The Human Resources Director, County Manager, and County Attorney shall be notified of all harassment complaints unless

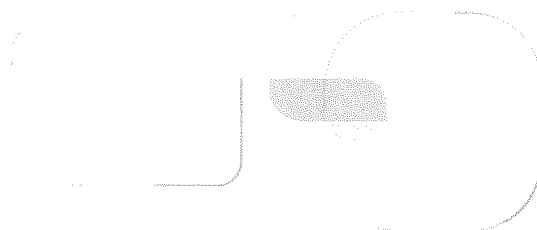
the complaint involves the Human Resources Director, County Manager, or County Attorney. The matter will be thoroughly investigated, and when appropriate, corrective action will be taken. It is emphasized that employees are not required to file a complaint first with their Supervisor.

F. Retaliation

No management personnel, supervisor or other employee shall place an employee at a disadvantage or retaliate against an employee for having reported a complaint of harassment under this policy. Employees must report retaliatory actions directly to the Human Resources Director, County Manager, or County Attorney as soon as possible after the incident occurs, then follow up with a written statement. Any retaliation exhibited by or directed toward management, supervisors, or other employees will result in corrective action, up to and including termination.

G. Investigation and Confidentiality

Employees who become aware of any harassment of an employee by another employee or a non-employee should report such harassment to their Supervisor, Human Resources Director, any Department Director, County Manager, Deputy County Manager, or County Attorney who shall be responsible for investigating all such incidents. Appropriate action will be taken to remedy the situation.



All complaints of harassment will be given a full, impartial and timely investigation and the employee will be advised of the findings. During such investigation, every effort will be made to protect the privacy rights of all parties, although confidentiality cannot be guaranteed.

H. Corrective Action

Any employee who is determined, after appropriate investigation, to have engaged in harassment of another employee will be subject to appropriate corrective action, up to and including termination.

False accusations regarding harassment will not be tolerated, and any person knowingly making a false accusation will be subject to corrective action, up to and including termination.

I. Maintenance of Records and Documents

Human Resources shall maintain records and documentation related to this policy, including documents related to procedures for hiring, screening, employee code of conduct, training, acknowledgement forms, incident reporting and disciplinary action under the BCC.

See the following federal laws for additional guidelines: Title VII of the Civil Rights Act of 1964 (Title VII), The Equal Pay Act of 1963 (EPA), The Age Discrimination in Employment Act of 1967 (ADEA), Title I and Title V of the Americans with Disabilities Act of 1990 (ADA), ADA Amendments Act of 2008, Genetic Information Nondiscrimination Act of 2008 (GINA), and The Civil Rights Act of 1991.

5.1 Safety Policy

I. OBJECTIVE

The County is committed to ensuring that employees have safe and healthy conditions in which to work. This obligation is owed to each employee and citizen of Lake County, since there is a direct relationship between the personal and monetary cost of accidents and the County's ability to provide reliable cost-effective services. This policy applies to all County employees and County volunteers.

II. DIRECTIVES

A. Identification and correction of all safety hazards and issues must have immediate and decisive action. Effective implementation of a comprehensive safety program depends upon a commitment of all employees. In order for a safety program to be effective, all employees must understand what is expected of them and safety must be an ongoing and essential part of every work day.

B. The County's Safety Program consists of several key elements:

1. Responsibilities of Management, Supervisors, and Employees
 - Safety responsibilities at every level of the County must be clearly defined in writing and relayed through training.



2. Written Procedures and Training Programs - Specific written safety procedures and training programs clearly define safety expectations that are necessary to prevent exposures, fatalities and serious injuries.
3. Safety Meetings - Safety meetings are held and provide an opportunity to discuss a variety of safety topics.
4. Safety Action Team (SAT) - The SAT's main function is to facilitate and improve the safety of all employees.
5. Corrective Action Administration Procedure - The County's Corrective Action Administration Procedure defines how safety rules shall be fairly and consistently addressed when individuals fail to adhere to them.

See the following State laws for additional guidelines: Chapter 440, Florida Statutes.



4.5 Sexual Misconduct (Amended March 26, 2013)

I. OBJECTIVE

The County is committed to maintaining a working environment for employees, County volunteers and citizens that is free from any form of sexual misconduct. This policy applies to all County employees and County volunteers.

II. DIRECTIVES

A. The County will not tolerate any behavior by its employees (and volunteers) which constitutes Sexual Misconduct. "Sexual Misconduct" means any actual or attempted sexual assault, sexual abuse, sexual exploitation, indecent or sexual solicitation, or public indecency, as defined by state and local laws. Sexual Misconduct by non-employees toward County employees shall also not be tolerated.

B. Sexual misconduct can occur during interactions and/or relationships between individuals of the same gender or different gender, and between adults and minors. "Sexual Misconduct" does not include "Sexual Harassment".

C. Reporting

1. It is the expressed policy of the County to encourage individuals alleging Sexual Misconduct to come forward with such claims. In order to conduct an immediate investigation, any incident of Sexual Misconduct must be reported as quickly as possible.
2. Employees are required to report any known or suspected incidents of sexual misconduct to their immediate Supervisor, Human Resources Director, any Department Director, County Manager, Deputy County Manager, or County Attorney.

Employees are not required to report known or suspected cases to their immediate supervisor first. If the supervisor to whom an employee reports is the offending person, the report should be made to the next higher level of management or individuals listed above. In all cases, the Human Resources Director, County Manager, and County Attorney shall be notified, unless the complaint involves the Human Resources Director, County Manager, or County Attorney.

3. Employees should not assume that the County is aware of any incidents of sexual misconduct. Employees will not be penalized in any way for making a report, in good faith, under this policy and procedure.
4. Incidents of alleged sexual misconduct shall also be immediately reported to local law enforcement in accordance with Section 794.027, Florida Statutes, Section 753.05, Florida Statutes, and/or Chapter 39, Florida Statutes.
5. The supervisory/management representative receiving the initial report (as described above) shall be responsible for contacting local law enforcement, if not done so already.

D. Retaliation

No management personnel, supervisor or other employee shall place an employee at a disadvantage or retaliate against an employee for having reported a complaint of sexual misconduct under this policy. Employees must report retaliatory actions directly to the Human Resources Director, County Manager, or County Attorney as soon as possible after the incident occurs, then follow up with a written statement. Any retaliation exhibited by or directed toward management, supervisors, or other employees will result in corrective action, up to and including termination.

E. Investigation and Confidentiality

Employees who become aware of any sexual misconduct of an employee should report such incidents to their Supervisor, Human Resources Director, any Department Director, County Manager, Deputy County Manager, or County Attorney who shall be responsible for investigating all such incidents. Appropriate action will be taken to remedy the situation.

All complaints will be given a full, impartial and timely investigation. During such investigation, every effort will be made to protect the privacy rights of all parties, although confidentiality cannot be guaranteed.

F. Corrective Action

Any employee who is determined, after appropriate investigation, to have engaged in sexual misconduct in violation of this policy will be subject to corrective action, up to and including termination. False accusations regarding sexual misconduct will not be tolerated, and any person knowingly making a false accusation will be subject to corrective action, up to and including termination.

G. Maintenance of Records and Documents

Human Resources shall maintain records and documentation related to this policy including documents related to procedures for hiring, screening, employee code of conduct, training, acknowledgement forms, incident reporting and disciplinary action under the BCC.

See the following State laws for additional guidelines: Section 794.027, Florida Statutes; Section 753.05, Florida Statutes; Chapter 39, Part II, Florida Statutes.

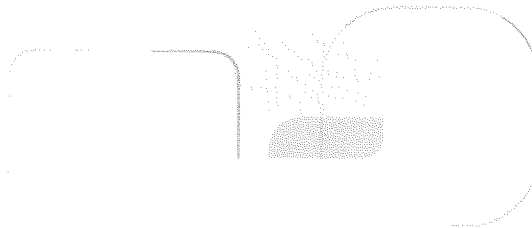
5.3 Workers' Compensation and Property and Liability Programs

I. OBJECTIVE

The County is committed to providing employees with procedures guiding employees and management through the Workers' Compensation and Property and Liability programs. This policy applies to all County employees and County volunteers.

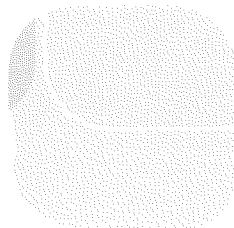
II. DIRECTIVES

- A. The County's Workers' Compensation and Property and Liability programs will identify procedures that will provide for adequate and timely reporting, treatment, compensation, restoration and recovery.
- B. The County recognizes the need to protect its assets and to preserve operational continuity from risks and hazards that may arise from business activities or from other activities or events that may affect the County.
- C. The County is committed to providing a safe and healthy environment to protect employees and other members of the public to whom the County has such a responsibility.
- D. All employees are required to immediately report on-the-job injuries/illnesses or damage to County property immediately to their supervisor.



- E. Employees covered under the County's Workers' Compensation Program must go to the Healthcare Provider authorized by the County, unless the injury/illness requires emergency treatment at an urgent care facility/hospital or the injury/illness occurs after the Healthcare Provider's hours of operation.
- F. Light duty work assignments, if available, may be provided to employees who experience an on-the-job injury and/or illness, to accommodate restrictions established by the Workers' Compensation Physician. Employees who refuse light duty work assignments will not receive Workers' Compensation pay, and such employees may use their sick and annual leave, in that order, until released to regular work duty. Light duty work assignments are not provided for non-Workers' Compensation-related injuries and/or illnesses.
- G. Employees involved in an automobile accident while conducting County business shall contact law enforcement and, if found to be at fault, will be required to submit to a drug and alcohol screening.

See the following State laws for additional guidelines: Section 768.28, Florida Statutes.





Title: Workers' Compensation Program

Number: ES-5.02.01

Approved: October 27, 2010

Cancels: ES-5.02.01 dated July 13, 2009

Originator: Department of Employee Services

Review: October 27, 2015

I. PURPOSE AND SCOPE

The purpose of this document is to provide procedures for reporting injuries and/or illnesses and obtaining treatment.

II. REFERENCES

- A. Florida Workers' Compensation Law, F. S. Chapter 440
- B. Workers' Compensation and Property & Liability Policy (LCC-71)
- C. Workers' Compensation and Property & Liability Claims Settlement Policy (LCC-72)
- D. Workers' Compensation and Property & Liability Claims Committee (ES-5.03.01)
- E. Family Medical Leave Act (FMLA) (ES-6.04.08)

III. APPLICABILITY

This procedure applies to all employees of Lake County Board of County Commissioners (BCC) and County Volunteers.

IV. PROCEDURES

During a Workers' Compensation claim, it is important that the manager/supervisor, employee, case manager, and the third party administrator communicate with one another to ensure that the Lake County employee who has experienced an on-the-job injury or illness returns to their normal job duties as soon as possible. The Department of Employee Services (Employee Services) is available to answer questions or provide guidance concerning Workers' Compensation procedures.

A. Responsibilities

1. Employee - All Lake County employees are required to immediately report on-the-job injuries and/or illnesses to their immediate supervisor.
2. Management/Supervisory - Supervisors are responsible to ensure all necessary Workers' Compensation reports are, completed, faxed or e-mailed to the Third Party Administrator (TPA), and collected and submitted to Employee Services immediately following an incident. These reports include the State of Florida's required First Report of Injury or Illness form and Lake County's Injury/Illness Reports. Lake County's Injury/Illness Reports include the Supervisor Investigation, Employee Statement, and Witness Statement forms. *(More information regarding the reporting requirements and forms are located in Section E, and on the Employees Services Workers' Compensation webpage.)*
3. Service Providers - The Third Party Administrator (TPA) will conduct investigations to gather information, obtain statements, communicate with injured employees and their supervisors, and when necessary negotiate settlements.

Lake County's managed healthcare company's Case Manager will coordinate the Workers' Compensation medical care of employees. Employees should contact the Case Manager whenever they have questions about their Workers' Compensation medical care. The Case Manager can be contacted twenty-four hours a day, seven days a week. Employee Services is available Monday through Friday (during normal working hours) to answer questions or provide guidance concerning Workers' Compensation procedures.

B. Emergency Medical Treatment

1. The employee (or employee witness) will notify the supervisor as soon as possible if the injury/illness requires emergency medical treatment and is considered life-threatening.
2. In the event of a life-threatening injuries or illnesses, someone should call 911 immediately. Employees with life-threatening injuries or illnesses should be transported to an urgent care facility/hospital by ambulance. If employee is unable to communicate with the urgent care facility/hospital due to medical condition, supervisor and/or Employee Services will ensure all information is provided to the urgent care facility/hospital and the TPA. If unsure whether a medical condition is a life-threatening emergency, 911 should be called.

Examples of life-threatening injuries or illness include, but are not limited to:

- a. Unconsciousness
 - b. Broken bones
 - c. Sudden dizziness or difficulty seeing
 - d. Severe abdominal pain
 - e. Trauma or injury to the head
 - f. Partial or total amputation of a limb or extremity
 - g. Persistent pain or discomfort in the chest or arms
 - h. Not breathing or having trouble breathing
 - i. No signs or lack of circulation
 - j. Severe bleeding
 - k. Seizures that are unusual, prolonged or multiple, last more than 5 minutes, result in injury or occur in someone who is pregnant or diabetic
 - l. Drug overdose
 - m. Eye injuries
 - n. Gunshot, knife or other weapons wound
 - o. Accidents such as falls or involving motor vehicles
 - p. High fever (greater than 101°F) with a severe headache and a stiff neck
3. The 911 caller should provide the following information to the 911 operator:
- a. The address and/or location of the emergency;
 - b. The telephone number where the emergency is located;
 - c. A brief description of the problem including whether the person(s) is conscious and/or breathing; and
 - d. The name of the employee calling 911.
- Once the 911 call has been made, the caller should remain on the line to respond to additional questions from the 911 operator, if necessary.
4. If possible, the supervisor will provide two (2) copies of a First Report of Injury or Illness to the employee and/or ambulance crew to present to the urgent care facility/hospital and pharmacy, if necessary. Questions regarding treatment or prescriptions should be directed to the managed healthcare company's Case Manager. The employee's supervisor will ensure that all reports are forwarded to the TPA and that all originals are forwarded to Employee Services.
5. As soon as possible following the emergency treatment, the employee must go to the authorized Workers' Compensation Healthcare Provider as required for continued Workers' Compensation coverage. The employee must provide the Healthcare Provider with a copy of the completed First

Report of Injury or Illness form, which serves as authorization for treatment.

C. Non-emergency Medical Treatment

1. If the injury/illness does not require emergency medical treatment and the injury/illness is not considered life threatening, the employee will notify the supervisor immediately. (If unsure whether a medical condition is a life-threatening emergency, 911 should be called.)

Examples of illnesses/injuries that may not be life-threatening include, but are not limited to:

- a. Rashes
 - b. Upper respiratory infections
 - c. Sore throats
 - d. Earaches
 - e. Headaches
 - f. Abrasions
 - g. Lacerations
 - h. Flu like symptoms
 - i. Back pain
 - j. Sprains
 - k. Minor fractures
2. The supervisor will provide two (2) copies of the First Report of Injury or illness to the employee to present to the Healthcare Provider and Pharmacy, if needed. The employee must provide the Healthcare Provider with a copy of the completed First Report of Injury or Illness form, which serves as authorization for treatment. The employee's supervisor will ensure that all reports are forwarded to the TPA and Employee Services.
 3. Questions regarding medical treatment and care should be directed to the TPA's managed healthcare company's Case Manager.
 4. The employee must use the authorized Healthcare Provider unless the injury/illness occurred after the Healthcare Provider's hours of operation.
 5. If the injury/illness occurred after the Healthcare Provider's hours of operation, the employee should obtain medical treatment at the nearest urgent care facility/hospital. As soon as possible after treatment, the employee must go to the authorized Workers' Compensation Healthcare Provider as required for continued Workers' Compensation treatment. Questions regarding treatment or prescriptions should be directed to the managed healthcare company's Case Manager.

D. Healthcare Provider

Employees covered under Lake County's Workers' Compensation Program must go to the Healthcare Provider authorized by the County, unless the injury/illness requires emergency treatment at an urgent care facility/hospital or the injury/illness occurs after the Healthcare Provider's hours of operation. Specific information such as hours of operation, contact numbers and location can be found on the Employee Services Workers' Compensation webpage. (*See Section F*)

Medical treatment provided by an unauthorized Healthcare Provider may not be covered under the Lake County Workers' Compensation Program.

E. Workers' Compensation Reports

Workers' Compensation reports are easily obtained from the Lake County intranet, through the "Forms" Quick Link or by going to the Employee Services - Workers' Compensation webpage through the intranet or internet. (*See Section F*)

Supervisors are responsible for ensuring that all reports/forms are provided to the employee(s) and witnesses to complete. Supervisor shall also ensure that all of the documents are completed correctly, collected, and submitted as a complete packet to Employee Services immediately following an incident. (The packet should include the following: First Report of Injury or Illness, Injury/Illness Report – Supervisor Investigation, Injury/Illness Report – Employee Statement, and if needed a Incident Report – Witness Statement.)

1. First Report of Injury or Illness

- a. The supervisor and employee must complete the First Report of Injury or Illness immediately (or as soon as possible, if an emergency situation) after an injury/illness is reported.
- b. The supervisor and employee must complete the report and make two (2) copies to present to the urgent care facility/hospital and pharmacy, if needed. The supervisor shall also provide the employee with a print out of the more specific information and guidance provided on the Employee Services – Workers' Compensation webpage.
- c. The employee presents a copy of the report to the Urgent Care Facility or Healthcare Provider. This report serves as authorization for treatment. The additional copy of the report serves as authorization for pharmacy/prescription coverage if necessary.
- d. The supervisor must fax or e-mail the First Report of Injury or Illness

report to the County's Workers' Compensation TPA.

- e. The completed report shall be forwarded to Employee Services, immediately following an incident. (The report should be sent along with the other documents required.)
- f. This report is required by the state of Florida Department of Financial Services.

2. First Report of Injury or Illness – Report Only

This report is to be used by supervisors for employees who do not wish to seek medical treatment for the injury/illness, but still need to report the possible Workers' Compensation incident.

- a. Supervisor and employee must complete the First Report of Injury or Illness (Report Only) immediately after an injury/illness is reported.
- b. Supervisor and employee must complete the Report Only, since the employee elects not to have medical treatment.
- c. Supervisor must fax or e-mail the report to the TPA.
- d. The completed report shall be forwarded to Employee Services immediately following an incident.
- e. Supervisor should also provide the employee with a copy of the specific information found on the Employee Services - Workers' Compensation webpage. (The report should be sent along with the other documents.)
- f. This report is required by the state of Florida Department of Financial Services.

3. The Supervisor is responsible for ensuring that the following reports are immediately completed after an injury/illness occurs and/or is reported:

- a. *Required:* Injury/Illness Report – Supervisor Investigation
- b. *Required:* Injury/Illness Report – Employee Statement
- c. *Required if witness/witnesses:* Incident Report – Witness Statement

The report(s) shall be forwarded to Employee Services along with the First Report of Injury or Illness, including Report Only.

F. Workers' Compensation Webpage

The Employee Services Workers' Compensation webpage provides specific information and contact numbers for the County's Third Party Administrator, Healthcare Provider and Case Manager. Employee Services can also provide this information if necessary.

Supervisors should provide a print out of the specific information found on the Workers' Compensation webpage to the employee along with the First Report of Injury or Illness form. Supervisors should keep copies on hand that can be easily accessible in times of an emergency.

To obtain this information, go to the Employee Services intranet/internet webpage and click on Workers' Compensation in the Wellness & Safety section, and print out the entire page.

G. On-the-Job Injury or Illness Flow Chart

The On-the-Job Injury or Illness Flow Chart provides quick reference information on steps to take for emergency medical treatment, non-emergency medical treatment and no medical treatment procedures.

H. Light/Restricted Duty

The supervisor will provide light duty work assignments to any employee on restrictions due to Workers' Compensation Physician recommendations. Light duty work assignments are only provided to employees who experience an on-the-job injury(ies) and/or illness(es).

If the employee's department does not have a light duty work assignment, the supervisor should contact Employee Services. Employee Services will arrange with other departments for light duty assignments.

Employees who refuse light duty work assignments will not receive Workers' Compensation pay, and such employees may use their sick and annual leave, in that order, until released to regular work duty. If the employee has exhausted all accrued leave and still refuses light duty assignments, then the employee will go into a no pay status until the Workers' Compensation Physician releases them to regular work duty. During this time, the employee may have reinstatement rights in accordance with the Family Medical Leave Act (FMLA), if applicable. (See item I. 10.)

The employee will continue light duty work assignment until released by the Workers' Compensation Physician to return to regular work duties. If no light duty assignments exist within the County, the employee shall receive indemnity benefits under the Workers' Compensation program.

I. Compensation and Benefits

An employee who is required to be absent from work due to an on-the-job injury/illness shall be compensated as follows:

1. Workers' Compensation does not pay for absences during the initial seven (7) calendar days (cumulative) following an accident. The employee may choose to use accrued sick leave hours for the first 7 days, and as supplement pay to Workers' Compensation pay. Beginning the 8th day, the employee will start receiving indemnity benefits of 66⅔% of their average weekly wage. If the absence exceeds 21 calendar days, Workers' Compensation will pay the employee for the initial 7 days.
2. Worker's Compensation will pay compensation benefits for absences beyond the first 7 calendar days in accordance with Florida Statutes Chapter 440.
3. County group benefits (health insurance, life insurance, etc.) shall continue so long as the employee remains in a pay status and in compliance with the eligibility requirements of the County and Workers' Compensation Program. If the employee goes into a no-pay status, the employee will be required to make payments for his/her portion of employee benefits premiums until the employee returns to work. Arrangement for payments will be made through Employee Services.
4. All available sick leave hours must be exhausted, before accrued annual leave may be used to supplement Workers' Compensation indemnity benefits. (See item I. 10.)
5. Any leave associated with an on-the-job injury/illness (paid or unpaid), where the injury/illness is a "serious health condition" as defined in the Family and Medical Leave Act, shall be designated as Family Medical Leave (FMLA) and run concurrently with Workers' Compensation leave.
6. Employees are required to report their current work status to their supervisor, as determined by the Workers' Compensation physician (in writing) immediately following each office visit.
7. Different rules apply to employees taking leave in accordance with the Family Medical Leave Act (FMLA). Please refer to the County's FMLA Policy and Procedure for additional information.
8. The employee's time sheet will be coded as follows:
 - a. First day of the on-the-job injury/illness:

CW - Enter the number of hours used spent at the authorized health care facility or urgent care facility. In addition, use CW when employee attends a doctor visit for Workers' Compensation.

- b. First 7 calendar days of the on-the-job injury/illness:

WS - Enter the number of sick leave hours employee uses.

WV - Enter the number of annual leave hours employee uses.

WU - Enter the number of non-paid hours employee uses.

- c. After the first 7 calendar days of the on-the-job injury/illness:

WR - Enter 66.6% of employee's work day hours. Employee has the option of supplementing 33.4% with sick or annual leave.

(e.g., 5.33 **WR** and 2.67 **WS**, for an eight hour day, or 6.66 **WR** and 3.34 **WS**, for a ten hour day.)

- d. When FMLA runs concurrently with Workers' Compensation:

FLWR - After the first 7 calendar days of the on-the-job injury/illness.

FLWS - Enter the number of sick leave /FMLA hours employee uses.

FLWV - Enter the number of annual leave /FMLA hours employee uses

FLWU - Enter the number of non-paid /FMLA hours employee uses.

- e. When employee is placed on light duty for the on-the-job injury/illness:

LD - Enter the number of hours employee is on light duty.

9. The employee does not use sick leave for Workers' Compensation related doctor's appointments.

10. The County will pay the employee for time taken for medical treatment if it is during their regularly scheduled work hours.

J. Workers' Compensation and Property & Liability Claims Committee

The purpose of the Workers' Compensation and Property & Liability Claims Committee is to review, approve/deny and settle Workers' Compensation, Property and/or Liability claims of \$25,000 or less, and will review and recommend for approval claims greater than \$25,000 to be presented to the Board of County Commissioners for approval. The Workers' Compensation and Property & Liability Claims Committee shall accept or give all proper releases on behalf of the County.

The Board of County Commissioners upon deeming it to be in the best interest of the program to settle a worker's compensation, property or liability claim shall have the authority to do so for claims with a value greater than \$25,000.

K. Safety Action Team

The Safety Action Team will review Injury/Illness reports at monthly meetings and make recommendations to reduce or eliminate future Workers' Compensation claims.

L. Further Investigation

Employee Services may require more information than the Workers' Compensation Reports provide. An investigation may be initiated if Employee Services deems it necessary, if the information contained in the report is contradictory or lacking in detail. The TPA and/or an Employee Services representative will conduct an investigation to gather more information and make recommendations for preventing future claims and possible corrective actions.

V. **RESERVATION OF AUTHORITY**

The authority to issue or revise this Procedure is reserved to the County Manager. The County Manager may authorize exceptions to this procedure when deemed appropriate.



Sanford A. Minkoff
Interim County Manager
Lake County



Title: Property & Liability Program

Number: ES-5.02.02

Approved: October 27, 2010

Cancels: ES-5.02.02 dated
July 13, 2009.

Originator: Department of Employee
Services

Review: October 27, 2015

I. PURPOSE AND SCOPE

The purpose of this document is to provide procedures for reporting property damage and liabilities.

II. REFERENCES

- A. Chapter 768.28, Florida Statutes, Waiver of sovereign immunity in tort actions; recovery limits; limitation on attorney fees; statute of limitations; exclusions; indemnification; risk management programs.
- B. Workers' Compensation and Property & Liability Policy (LCC-71)
- C. Workers' Compensation Program (ES-5.02.01)
- D. Workers' Compensation and Property & Liability Claims Settlement Policy (LCC-72)
- E. Workers' Compensation and Property & Liability Claims Committee (ES-5.03.01)

III. APPLICABILITY

This procedure applies to all employees of Lake County Board of County Commissioners (BCC) and County volunteers.

IV. PROCEDURES

During a Property & Liability claim, it is important that the manager/supervisor, employee

and the Third Party Administrator communicate with one another to ensure that all information is obtained concerning the claim. The Department of Employee Services (Employee Services) is always available to answer questions or provide guidance concerning Property & Liability policies and procedures.

A. Responsibilities

1. Employee - All Lake County employees are required to immediately report to their Supervisor any incidents involving damage to Lake County property. The employee must not admit liability or offer a settlement in situations when damage is made to citizen(s) property.
2. Management/Supervisory - Supervisors will immediately complete the property damage reports for incidents involving damage to Lake County or citizens' property. The supervisor is responsible for ensuring that all reports are completed, collected, and submitted as a complete packet to the Office of Employee Services immediately following an incident. (*See Section F*)
3. Service Providers - The Third Party Administrator (TPA) will gather information, communicate with claimants, obtain statements, and when necessary, negotiate settlements.
4. Employee Services will contact the Third Party Administrator concerning property & liability claims, coordinate meetings and actions of the Worker's Compensation and Property & Liability Claims Committee, and advocate the County's position regarding settlement of claims.

B. Damage to County Property

1. Supervisors must report any damage to County property to Employee Services immediately following an incident or as soon as possible after the damage has been discovered utilizing the property damage forms. The forms must include information on the year, make, model, and County property item number. A photo of the damaged item should also be provided. (*See Section F*)
2. Any incident involving vehicle damage, theft, disappearance, vandalism or "hit and run" must also be reported immediately to the appropriate law enforcement authority.
3. If County property damage is under \$1,000, the repair payments will be the responsibility of the Department that had custody of the equipment at the time of the incident. It is recommended that the Department obtain at least two (2) estimates for repair.

4. If County property damage is over \$1,000, the repair payments will be the responsibility of Employee Services and TPA.
5. Employee Services will act as the liaison between the supervisor and the TPA, to obtain the necessary information, provide contact information for appraisals, provide explanations and advocate the County's position on any settlement recommended by the TPA.

C. Damage to County Vehicles

All accidents involving damage to County vehicles shall be reported to Employee Services immediately following an incident. The Supervisor will forward the completed Lake County Property Damage forms and a copy of the local authorities' investigation report from the accident scene, if applicable, to Employee Services. The supervisor should take pictures of the vehicle damage and the accident scene and forward them to Employee Services, along with any documents and reports.

1. Local Authorities' Accident Report
 - a. County at fault - If the appropriate law enforcement authority's accident report from the scene of the accident indicates that the County vehicle driver was at fault, the supervisor will require the employee driver to submit to a drug and alcohol test at a Lake County authorized Healthcare Provider immediately following the local authorities' completed investigation. The supervisor will escort the employee to the testing facility. If the County driver is at fault, Employee Services will conduct an investigation to gather more information and make recommendations for preventing future accidents and possible corrective action towards employee involved.
 - b. Driver at fault - If the local authorities' accident report from the scene of the accident indicates that the other vehicle driver is at fault, the County driver will obtain the other driver's insurance company information. Employee Services will contact the driver at fault's insurance company for claim reporting, appraisal, and payment procedures.
2. If the preliminary estimate of the County vehicle damage is over \$1000, estimates shall be obtained from two (2) local repair shops and submitted to Employee Services. Employee Services will advise the supervisor to schedule repairs at an approved facility. Once the repairs are complete, Employee Services or the TPA will process the payment.
3. When necessary, Employee Services will report the claim to the TPA and the TPA will contact a property damage appraiser to assess the amount of damage.

The vehicle will be repaired at a repair shop according to the appraised estimate and the TPA will process payment directly to the repair shop or the claimant.

D. Personal Vehicles

1. Employees who choose to drive their personal vehicle on County business will be required to report any claims for their personal vehicle to their personal insurance. The employee's personal insurance shall cover damages for his/her personal vehicle. The County will not reimburse employees for deductibles on insurance policies.
2. If a personal vehicle is to be used for County business, the employee shall:
 - a. maintain auto insurance in accordance with Florida state law,
 - b. provide proof of insurance to Employee Services upon request,
 - c. maintain the vehicle in safe operating condition.
3. Motorcycles may not be used for County business.
4. County logos shall not be applied to personal vehicles.

E. Injury and/or Property Damage to a Citizen

Supervisor must notify Employee Services immediately following an injury and/or property damage to a citizen.

1. Citizens' injuries or property damage at a County facility

The supervisor must report the incident immediately to Employee Services. The Citizen Property Damage & Injury Report form must be completed by the supervisor. The supervisor is responsible for ensuring that all appropriate reports are completed, collected, and submitted to Employee Services immediately following an incident. (*See Section F*)

2. Citizen's injury, vehicle or other property damage claims

Employee Services will investigate the incident and decide whether the claim should be accepted, denied and/or sent to the TPA for further investigation. If a claim is to be denied, a denial letter will be sent to the claimant. If it is determined that the County has responsibility for the damage, the TPA will assign an appraiser to assess the damage. Employee Services and/or the TPA will request settlement authority from the County.

3. Citizen's vehicle damaged by a County road defect

Employee Services will investigate a report from a citizen claiming damage to personal vehicle caused by a Lake County road defect.

- a. Employee Services will obtain details of damage from citizen (and witness/es if available) and complete the Potholes and Other Road Hazards Report form.
- b. Employee Services will contact the Public Works Road Operations department and provide information on the road defect. This information will include location, direction citizen traveling, distance from edge of road, dimensions, etc. Employee Services will request maintenance records, if any, on the pothole and/or other road defect. If the maintenance record for road defect will include the location and when the repair was completed. The Public Works Road Operations Department/Division will also provide information if there are no previous complaints of the road defect. The Public Works Road Operations Department/Division are to respond with the information on the road defect as soon as possible.
- c. If there are no previous complaints or if Public Works Road Operations have repaired a pothole and/or other road hazards within 72 hours of receiving notification of the road defect, Employee Services will forward a Denial Letter, if applicable to the citizen.

F. County Property Damage caused by Citizen or Private Entity

1. If post-incident investigation indicates that damage to Lake County property was caused by a citizen or private entity (such as County guardrail damage from a vehicle accident), Employee Services will contact the citizen to obtain insurance contact information and contact the citizen's insurance company for payment.
2. If the citizen is uninsured, uncooperative or unreachable, the County and/or the TPA will attempt to recover costs for the County property damage. If the costs are not recovered, payment will be processed by the County and/or TPA from the County's insurance fund.

G. Property & Liability Reports

The Lake County Workers' Property & Liability Webpage provides specific information on the County's Property & Liability procedures and forms. The following Property & Liability reports can be obtained from the Lake County intranet, either

through the "Forms" Quick Link or by going to the Employee Services Property & Liability webpage through the intranet or the internet.

Supervisors are responsible for ensuring that all appropriate reports are completed, collected, and submitted to Employee Services immediately following an incident.

1. Supervisor is responsible to insure that the following respective Lake County reports are immediately completed after incidents involving damage to County property, including buildings, vehicles and equipment.
 - a. Required: Lake County Property Damage – Supervisor Investigation
 - b. Required: Lake County Property Damage – Employee Statement
 - c. Required if witness(s): Incident Report – Witness Statement
2. Citizen Property Damage & Injury Report – The Supervisor must complete immediately for any County incident that involves injury and/or property damage to a citizen.
3. Lake County Property Damage - Lightning Loss Affidavit
 - a. A Certified Electrician must complete following lightning damage to County property.
 - b. The form must be notarized before forwarding it to Employee Services.
4. Pothole and Other Road Hazards Report – Employee Services must complete following a report of a road hazard claim by a citizen.

H. Workers' Compensation and Property & Liability Claims Committee

The purpose of the Workers' Compensation and Property & Liability Claims Committee is to review, approve/deny and settle Workers' Compensation, Property and/or Liability claims of \$25,000 or less, and will review and recommend for approval claims greater than \$25,000 to be presented to the Board of County Commissioners for approval. The Workers' Compensation and Property & Liability Claims Committee shall accept or give all proper releases on behalf of the County.

The Board of County Commissioners upon deeming it to be in the best interest of the program to settle a worker's compensation, property or liability claim shall have the authority to do so for claims with a value greater than \$25,000.

I. Safety Action Team

The Safety Action Team will review Property Damage reports at monthly meetings and make recommendations to reduce or eliminate future damage to County property.

J. Further Investigation

Employee Services may require more information than the Property Damage Reports provide. An investigation can be initiated if Employee Services deems it necessary because of information either contained or lacking in the reports. An Employee Services employee will conduct an investigation to gather more information and make recommendations for corrective actions.

V. **RESERVATION OF AUTHORITY**

The authority to issue or revise this Procedure is reserved to the County Manager. The County Manager may authorize exceptions to this procedure when deemed appropriate.



Sanford A. Minkoff
Interim County Manager
Lake County

4.6 Workplace Violence

(Amended March 26, 2013)

I. OBJECTIVE

The County is committed to protecting employees, volunteers, and members of the public, and minimizing the risk of violence in the workplace. The purpose of this policy is to maintain a workplace that is free from violence and to prevent the potential presence of violence. This policy applies to all County employees and County volunteers.

II. DIRECTIVES

- A. The County does not permit, tolerate or condone any physical or non-physical acts of violence in the workplace that result in threatened or actual harm to a person or threatened or actual damage to property. Workplace violence includes any threatening words or actions whether verbal or non-verbal, which create in the mind of any reasonable person the belief of receiving immediate or future harm to any person or property.
- B. All employees are responsible for maintaining a safe and secure work environment that is free from the presence of violence by reporting threats or acts of violence in the workplace, refraining from exhibiting behavior or actions that could be interpreted as violent, and fully cooperating in the investigation of threats or acts of violence.
- C. To the extent permitted by law, the County prohibits the possession of weapons on County premises or properties, including housing/carrying a weapon in a private vehicle on County owned or leased property. For the purpose of this policy, "weapon" includes all firearms, ammunition, knives and

cutting utensils, clubs, brass knuckles, explosives or destructive devices, chemical weapons and devices, stun guns, or other objects that may be considered weapons as defined by Section 790.001, Florida Statutes.

The only exceptions to the preceding prohibition on possession of a weapon shall be where the use of a weapon is a necessary and approved requirement of the employee's job or where the individual is specifically authorized to maintain a firearm in a locked personal motor vehicle by Section 790.251, Florida Statutes.

D. Reporting

1. Employees have a "duty to warn" their Supervisors, Human Resources Director, Department Directors, County Manager, Deputy County Manager, or County Attorney of any potentially violent situations, or suspicious workplace activities, situations or incidents that they observe or that they are aware of that involve other employees, former employees, customers or visitors. The Human Resources Director, County Manager, and County Attorney shall be notified of all reports under this section unless the report involves the Human Resources Director, County Manager, or County Attorney. To the extent possible, such reports will be handled confidentially.
2. An employee will not be penalized in any way for making a report in good faith under this policy. Employees should not assume the County is aware of any employee violence problems and should immediately bring all complaints and concerns to the County's attention so that they can be appropriately addressed.

E. Retaliation

No management personnel, supervisor or other employee shall place an employee at a disadvantage or retaliate against an employee for having reported a workplace violence incident. Employees must report retaliatory actions directly to the Human Resources Director, County Manager, or County Attorney as soon as possible after the incident occurs, then follow up with a written statement. Any retaliation exhibited by or directed toward management, supervisors, or other employees will result in corrective action, up to and including termination.

F. Corrective Action

Any employee who is determined, after appropriate investigation, to have committed threatening or violent acts in violation of this policy may be removed from the workplace, and will be subject to corrective action up to and including termination, criminal prosecution, or both.

False accusations regarding acts of workplace violence will not be tolerated, and any person knowingly making a false accusation will be subject to corrective action, up to and including termination.

G. Maintenance of Records and Documents

Human Resources shall maintain records and documentation related to this policy including documents related to procedures for hiring, screening, employee code of conduct, training, acknowledgement forms, incident reporting and disciplinary action under the BCC.

See the following State laws for additional guidelines: Section 790.001, Florida Statutes, Section 790.053, Florida Statutes, Section 790.06, Florida Statutes, and Section 790.251, Florida Statutes.



Title: Workplace Violence

Number: ES-4.06.01

Approved: July 1, 2008

Originator: Employee Services

Review: July 1, 2013

I. PURPOSE AND SCOPE

The purpose of this document is to provide a written description of Lake County's Workplace Violence Procedures.

II. REFERENCES

Florida Statute, Chapter 790.001 - Weapons and Firearms
Florida Statute, Chapter 790.25 – Preservation and Protection of the Right to Keep and Bear Arms in Motor Vehicles Act of 2008
Lake County Workplace Violence Policy (LCC-74)

III. APPLICABILITY

This procedure applies to all employees of Lake County Board of County Commissioners (BCC).

IV. PROCEDURES

A. General Administration

Lake County does not permit, tolerate or condone any acts of violence in the workplace against its employees or visitors. All employees are responsible for maintaining a safe and secure work environment that is free from the presence of violence by reporting threats or acts of violence in the workplace, refraining from exhibiting behavior or actions that could be interpreted as violent and by fully cooperating in the investigation of threats or acts of violence.

B. Definitions

1. Weapons include all firearms, ammunition, knives and cutting utensils, clubs, brass knuckles, explosives or destructive devices, chemical weapons and devices, stun guns, or other objects that may be considered weapons as defined in section 790.001 of the Florida Statutes.
2. Workplace violence is any physical or non-physical act that results in threatened or actual harm to a person or threatened or actual damage to property. It includes any threatening words or actions whether verbal or non-verbal, which creates in the mind of any reasonable person the belief that immediate or future

harm to any person or property is imminent.

3. Examples of workplace violence includes, but is not limited to the following:
 - a. Verbal or physical threats of violence, regardless if there is any intent to carry out the threat.
 - b. The possession of a weapon (whether real or fake), as defined in Florida Statutes, on County property unless specifically protected by FS 790.251.
 - c. The display or use of any weapon, tool or other implement.
 - d. Any visual or physical actions or gestures that would have an intimidating effect.
 - e. Any verbally abusive language, with or without the use of profanity.
 - f. Any physical assault and/or battery.
 - g. Obscene and/or harassing phone calls.
 - h. Stalking.
 - i. Bomb threats.
 - j. Threatening comments regarding, or reference to, violent events and/or behavior.
 - k. Vandalism, arson, or sabotage.
 - l. Throwing objects regardless of whether or not a person is the target.
 - m. Intentional damage or destruction or sabotage of County property or equipment, another's property or equipment, or any substantial threat to destroy property and/or equipment.
 - n. Any other act or behavior that could be perceived as violent in the workplace.

C. Responsibility

1. Managers and supervisors are responsible for informing employees of this procedure and for its enforcement.
2. All employees, including supervisors and managers, must report behaviors that could be perceived as violent.

D. Preventative Measures

Supervisors, managers, and employees can reduce the risk of workplace violence by taking preventative measures. Examples of preventative measures are as follows:

1. Workplace violence is not tolerated, and any violation of the policy will result in corrective action up to and including termination.
2. Managers and supervisors should encourage employees to report incidents.
3. Communicate the importance of work safety on a regular basis.
4. Establish a professional and safety conscience work environment.
5. Be familiar with emergency procedures.
6. Be familiar with work location and any crime problems in or around the area.
7. Lock doors, even for brief periods, where practical.
8. Be especially careful when coming and going to and from one's personal vehicle.
9. Be cautious of suspicious persons entering and exiting work areas.
10. Never get into an elevator if uncomfortable with a person already in or getting into the elevator.

C. Response Procedures

Workplace violence generally falls into three categories. The specific response depends upon the applicable category. The suggested actions by category are:

1. *Violence Has Occurred*
 - a. Call 911 for law enforcement, fire and ambulance services.
 - b. Employees should report the incident to their supervisor and Department Director.
 - c. Evaluate the threat for additional incidences of violence, warn other potential victims, inform victims of available medical services and cooperate with law enforcement.
 - d. Refer media representatives to the Lake County Public Information Coordinator of the Information Outreach Department.
 - e. Contact the Office of Employee Services at the earliest possible time.
 - f. The Workplace Violence Incident Report should be completed as soon as possible and submitted to Employee Services. Employee Services will review the reported incident with department management to determine the appropriate course of action to be taken to address the incident and facilitate an immediate response to ensure the safety of all employees. (See Section F)
 - g. Once the immediate threat has been addressed and the work environment has been secured, Employee Services will initiate an investigation of the incident.

2. *Immediate Threat Exists*

- a. Employees should not put themselves or anyone else at risk during a threat or dangerous situation that is about to happen.
- b. Employees should report the incident to their supervisor and Department Director.
- c. If the situation does not defuse and come under control by eliminating all threats of danger and violence, employees should warn potential targets, and take reasonable actions to immediately exit the area.
- d. Call 911.
- e. The Workplace Violence Incident Report should be completed as soon as possible and submitted to Employee Services. Employee Services will review the reported incident with department management to determine the appropriate course of action to be taken to address the incident and facilitate an immediate response to ensure the safety of all employees.
- f. Once the immediate threat has been addressed and the work environment has been secured, Employee Services will initiate an investigation of the incident.

3. *Threat Made, No Immediate Danger Apparent*

- a. Employees should immediately report incident to their supervisor or next in line supervisor, if appropriate.
- b. Call 911.
- c. The Workplace Violence Incident Report shall be completed as soon as possible and submitted to Employee Services. Employee Services will review the reported incident with department management to determine the appropriate course of action to be taken to address the incident and facilitate an immediate response to ensure the safety of all employees.
- d. Once the immediate threat has been addressed and the work environment has been secured, Employee Services will initiate an investigation of the incident.
- e. Supervisors shall develop a plan of action in collaboration with Employee Services, to include appropriate corrective action based upon assessment of the incident.

D. **Weapons**

The County prohibits the possession of weapons on County premises or properties, including housing/carrying a weapon in a private vehicle parked on County owned or leased property.

1. Possession of a weapon shall be interpreted to include, but not limited to, an employee:
 - a. Having a weapon on or about one's person concealed or unconcealed.
 - b. Unlawfully or recklessly displaying a weapon.
 - c. Presenting a weapon for sale, loan or trade.
2. The only exceptions to the preceding prohibition on the possession of a weapon shall be where the use of a weapon is a necessary requirement of the employee's job or where the individual is specifically authorized to maintain a firearm in a locked personal motor vehicle by Florida Statute 790.521.

E. Reporting an Incident

Employees who become aware of a display of violent, abusive, or threatening behavior or a threat or tendency to engage in the same by another employee or visitor, must report such behavior to their immediate Supervisor, Employee Services Department Director, County Manager or Deputy County Manager by completing the Workplace Violence Incident Report.

To the extent possible, such reports will be handled confidentially, on a need-to-know basis.

Employees will not be penalized in any way for making a report in good faith. Do not assume the County is aware of any possible violent situations. Immediately report all complaints and concerns.

Any employee who intentionally makes a false allegation or report will be subject to corrective action up to and including termination.

The County Manager shall be notified of all reports under this section.

F. Workplace Violence Incident Report (*Attachment*)

The Workplace Violence Incident Report is to be used by employees and/or witnesses to document and report all acts of workplace violence including physical and/or verbal threats.

The Workplace Violence Incident Report can be obtained from the Lake County intranet, through the "Forms" Quick Link on the main page.

Completing the Workplace Violence Incident Report (*Attachment*)

1. The employee must complete the Workplace Violence Incident Report immediately after an incident.
2. The employee must sign the original report.

3. Completed report (both pages) should be faxed to Employee Services at (352) 343-9883, Attention: Director of Employee Services.
4. The original/signed report shall be mailed through interoffice mail or hand delivered to Employee Services.

G. Duty to Warn

Employees have a "duty to warn" their Supervisor, Department Director, Employee Services Director, County Manager or Deputy County Manager, of any suspicious workplace activity, situations or incidents that they observe or of which they are aware that involve other employees, former employees, customers or visitors. This includes but is not limited to, threats or acts of violence, aggressive behavior, offensive acts, threatening or offensive comments or remarks, possession of weapons on County property, or other examples provided in this procedure.

H. Retaliation

Retaliation against employees that report acts of violence as defined by this procedure will not be tolerated. Employees must report retaliatory actions in writing directly to Employee Services as soon as possible after the incident occurs. Retaliation may result in corrective action up to and including termination.

I. Corrective Action

Employees who commit threatening or violent acts may be removed from the workplace, and may be subject to corrective action up to and including termination, criminal prosecution, or both.

J. Searches

Everyone is concerned about personal security and the security of the workplace. Workplace security is a responsibility shared by the County and all employees. The County may request the cooperation of an employee in agreeing to a search of personal property such as packages, briefcases, purses and similar containers as well as private vehicles parked on County property unless specifically prohibited by Florida Statute 790.251. County supervisory and managerial employees have the right to enter or search County property with or without notice, including desks, lockers, computers, phones and e-mail. Generally, there shall be no expectation of privacy while on any County property or of any property brought onto County premises. This delicate balance between privacy and security is something important to everyone and cooperation is needed from all employees.

K. Training

All employees are required to attend a "Violence in Today's Workplace" training program that is designed to expose employees to the nature of workplace violence.

Participants are presented with the definition of workplace violence, traits and warning signs of violent behavior, and the measures to take when dealing with potential or immediate threats of violence. A review of the Lake County Workplace Violence policy (LCC-74) and this procedure is covered in this program.

IV. RESERVATION OF AUTHORITY

The authority to issue or revise this Procedure is reserved to the County Manager. The County Manager may authorize exceptions to this procedure when deemed appropriate.

Approved by: Cindy Hall, County Manger
Date: July 1, 2008



LAKE COUNTY
FLORIDA

Attachment

Workplace Violence Incident Report

Lake County Board of County Commissioners

This form is to be used to document and report all acts of workplace violence including physical and verbal threats. After completing this form, please FAX both pages (and any other information and/or additional pages) to the Office of Employee Services at (352) 343-9883, Attention: Director of Employee Services.

(Do not include any medical information on this form.)

Employee Data (Individual Reporting Incident)

Name: _____

Title: _____ Department: _____

Work Location(s): _____ Phone (wk/pager): _____

Specific Job Function(s): _____

Threat Information (Check all that apply.)

Subject Name (Individual Making Threat): _____

Subject Data: ☐ Employee ☐ Former Employee ☐ Non-Employee
☐ Other: _____ ☐ Don't Know

Type of Threat: ☐ Act of Violence ☐ Threat of Violence ☐ Act of Sabotage
☐ Other: _____

Threat Received by: ☐ In person ☐ Phone ☐ Letter ☐ E-mail
☐ Box ☐ Bag ☐ Other _____

Date & Time of Incident: _____ & _____ AM / PM
(MM/DD/YYYY)

Location: _____

Name and/or description of perpetrator: _____

Description of act or verbatim language of threat. (If via phone, skip to phone call section of this form): _____

Describe any additional comments made by the perpetrator or explanation of the threat or the workplace violence:

Known Factors (Of Perpetrator) Which May Increase Credibility of Threat (check all that apply)

- | | | |
|--|---|--|
| <input type="checkbox"/> Financial debt | <input type="checkbox"/> Known to have weapons | <input type="checkbox"/> Obsessive behavior |
| <input type="checkbox"/> Domestic difficulties | <input type="checkbox"/> Death of family member | <input type="checkbox"/> Previous violence |
| <input type="checkbox"/> Work related problems | <input type="checkbox"/> Significant behavior changes | <input type="checkbox"/> Disruptive behavior |

If the threat was witnessed in person:

Body Language: Arms waving Face/neck red Hands in fists Hands shaking Holding an object Looking around Reaching in pockets Shallow breathing Tense arms/legs	Description of Person: Male/female Age range _____ Height _____ Weight _____ Hair color/length/style _____ Eye color _____ Scars/Marks/Tattoos _____ Clothing/shoes _____ Other _____	Type of Weapon: _____ _____ _____ Other: _____ _____ _____
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Threat received via a telephone call:

If the threat is received by phone, what was heard?

Caller's Voice: Accent Angry Calm Cleared throat Cracking Crying Deep Deep Breathing Disguised Distinct Excited Familiar	 Irrational Laughter Lisp Loud Nasal Normal Ragged Rapid Raspy Slow Slurred Soft Stutter	Background: Animal noises Clear Factory/machinery House noises Incoherent Local Motor Music PA System Phone booth Static Street noise	Threat Language: Foul Message read by threat maker Taped Well-spoken Other: _____ _____ _____ _____
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What did caller say? (Include remarks, statements, and exact language.) _____

Other information regarding the caller: (Phone number and/or extension)

Date Call Received _____ Time Received _____ Length of Call _____

Was 911 called: ☐ Yes ☐ No If yes, explain outcome: _____

Signature: _____ Date: _____

Print Name: _____ Department: _____